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S.M.A.R.T.

*Sideline Management Assessment
Response Techniques Workshop*



Thursday, July 20, 2017
1:00 p.m. – 4:00 p.m.
Lansdowne Resort
Leesburg, VA

This event will be held in conjunction with the Virginia Academy of Family Physicians Annual Meeting.

The registration fee of \$45.00 registration will be offered for all ATC attendees to facilitate your attendance at this exceptional three-hour learning experience.

For more information please call 1-800-THE-VAFP. To register for the session, please complete the registration form on page three of this document and e-mail it to cmodesto@vafp.org or fax to 804-968-4418. *Please note that space is limited.*

Continuing Education Units (CEUs) will be awarded through the College of William and Mary (Provider #P769-2000). Participants will receive up to 3 EBP CEUs for completion of the course.

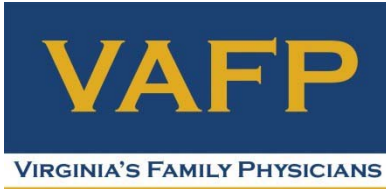
Overview:

This workshop will provide the athletic trainer and physician with the skills to appropriately evaluate and manage injuries on the athletic field and sideline. This is a hands-on interactive workshop. Participants will be expected to participate in functional, physical activities, immobilization and evaluation techniques. This workshop also provides a framework to foster a more collaborative relationship between athletic trainer and team physician providing the opportunity for each to demonstrate their expertise. The workshop will increase the confidence and competence of the athletic trainer who is currently or desiring to provide medical coverage of athletic events. This workshop is an ideal forum to practice your skills on athletes in full uniform right before the football season begins.

An emphasis will be placed on providing teaching points of the evaluation and management techniques for those interested in bring this program back to their local communities. Resources will be provided to those participants that are interested in bringing the skills back to their home communities.

Objectives: At the conclusion of the workshop, the participants will be able to:

- Appropriately manage, on the field, an athlete with a suspected acute spine injury.
- Appropriately manage, on the sideline, an athlete with a suspected concussion.
- Appropriately manage, on the field, an athlete with a suspected acute fracture and/or dislocation.
- Perform a musculoskeletal evaluation of the upper and lower extremities on individuals wearing protective athletic equipment.
- Access an individual's readiness to return to physical activities utilizing a progression of functional activities.



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*S*ideline *M*anagement *A*ssessment
*R*esponse *T*echniques Workshop

Workshop: “Hands-on Skills for the Team Physician and Athletic Trainer”

Outline for Workshop

Review of Game Plan

Pre Event Organization

- Program administration
- Event pre-planning
- Development of Emergency response plans

Pre Game Wrap Up

On-Field Management of the Injured Athlete

Step-by-Step Approach to the On-Field Assessment of Injuries

Game Time (Jamboree/Round Robin Approach)

Breakout Lab Sessions with participant participation (each group will rotate through each section) 45 minutes each

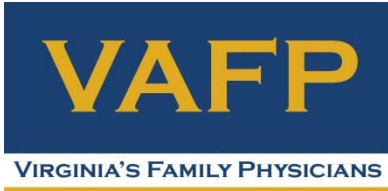
On-Field Management of Injuries

- Sideline Head Injury Screening
- On-Field Management of the Spine Injured athlete
 - Log roll and lift of athlete with Football protective equipment
 - Football shoulder pad, helmet and facemask removal
- Upper and Lower Extremity Evaluation of athlete in Football protective equipment
 - Sideline Management of Fractures and Dislocations; Immobilization and Splinting Techniques
 - Functional Testing with participant participation
 - Progression of activities for the return to participation
 - Return to Participation programs

Post Game Wrap Up

Conclusion

- Questions and Answer period
- Closing remarks
- Workshop evaluation



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Athletic Trainer Registration - \$45.00

Registrant Information

Name: _____

Address: _____

City/St/Zip: _____

E-mail: _____

Phone: _____ Fax: _____

E-mail (cmodesto@vafp.org), mail or fax this form to:
VAFP, 1503 Santa Rosa Road, Suite 207, Richmond, VA 23229
PHONE: (804) 968-5200 FAX: (804) 968-4418

(Faxed/scanned forms must include credit card payment)

Please Choose Your Payment Method

_____ A check payable to **VAFP** is enclosed in the amount of \$ _____

_____ Please charge my credit card in the amount of \$ _____

Name on credit card: _____

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Charges appear as "VAFP" on your credit card bill.